

EPA-R5-2014-003046

List Of Enclosures For:

Will Cook Waste Incorporated
25 North Ottawa Street
Joliet, Illinois 60431

ILD 980 613 038

Total (10 pages)

- Illinois Environmental Protection Agency letter dated April 16, 1982 (1 page)
- Illinois Environmental Protection Agency memorandum dated January 19, 1982 (1 page)
- RCRA Inspection Report-Interim Status Standards Form C-Transporter Inspection (40 CFR Part 263) (3 pages)
- Inspection Review Form (1 page)
- Notification Of Hazardous Waste Activity Form dated August 28, 1981 (2 pages)
- Acknowledgement Of Notification Of Hazardous Waste Activity (Verification) dated October 26, 1981 (1 page)
- Envelope from Illinois Waste Incorporated dated August 28, 1981 (1 page)



Environmental Protection Agency

1701 S. First Street Maywood, IL. 60153 719

312/345-9780

Refer to: General - Will County - Joliet/Will Cook Waste, Inc.
ILD980613038

April 16, 1982

Will Cook Waste, Inc.
25 N. Ottawa Street
Joliet, Illinois 60431

Gentlemen:

An inspection of the above facility was conducted by a representative of the Illinois Environmental Protection Agency (IEPA) on January 19, 1982. This inspection was conducted by the Illinois Environmental Protection Agency under a Cooperative Arrangement with, and authorization of, the United States Environmental Protection Agency (USEPA). A copy of the inspection report is enclosed. The purpose of the inspection was to determine your facility's compliance status with the Resource Conservation and Recovery Act (RCRA) of 1976, P.L. 94-580, as amended. According to the report your firm does not handle hazardous wastes. Should you transport hazardous wastes in the future, please be advised that you would have to comply with the requirements set forth in 40 CFR Part 263.

Your cooperation and efforts in this matter are appreciated. Should you have any questions about the report, please contact Jim Wiggins at the above number.

Sincerely,

A handwritten signature in cursive script, appearing to read "Kenneth P. Bechely".

Kenneth P. Bechely, Northern Region Manager
Field Operations Section
Division of Land/Noise Pollution Control

KPB:JKW:prb

Enclosure: Inspection Report

cc: Division File
Northern Region
U.S. E.P.A. - Region V



ILLINOIS ENVIRONMENTAL PROTECTION AGENCY

MEMORANDUM

TO: Division Five DATE: 1/15/03

FROM: John Delaney ☒ Information only

SUBJECT: Will County - Dept. of Health Waste Line ☐ Response requested

Will-County Waste Line is a transporter of various special
waste. They have not yet transported any hazardous waste
but anticipate doing so in the future. Signed permits for
manifests are on file for special waste transport.

SMH # 101
STATE IDENTIFICATION NUMBER
(If Applicable)

ILD980613038
EPA IDENTIFICATION NUMBER

RCRA INSPECTION REPORT - INTERIM STATUS STANDARDS
Form C - Transporter Inspection
(40 CFR Part 263)

I. General Information:*

(A) Transporter Name: Will-Cook Waste Line
(B) Street: 25 N Ottawa St.
(C) City: Joliet (D) State: Ill. (E) Zip Code: 60431
(F) Phone: (815) 726 7407 (G) County: Will
(H) Date of Inspection: 1/19/82 Time of Inspection (From) 2:00 pm (To) 2:30 pm
(I) Weather Conditions: 23° - sunny - dry

(J) Person(s) Interviewed	Title	Telephone
<u>Shirley Snodde</u>	<u>Bookkeeper</u>	<u>(815) 726 7407</u>
(K) Inspection Participants	Agency/Title	Telephone
<u>Shirley Snodde</u>	<u>Will-Cook Waste / Bookkeeper</u>	<u>(815) 726 7407</u>
<u>Jim Wiggins</u>	<u>EPA / Environmental Protection Specialist</u>	<u>(312) 345 9780</u>
(L) Preparer Information	Agency/Title	Telephone
Name:		
<u>Jim Wiggins</u>	<u>EPA / Environmental Protection Specialist</u>	<u>(312) 345 9780</u>

*If site is also a generator do not complete Section I of this form.

Do not use this form if transporter is also a treatment, storage, and/or disposal facility.
Complete form "A" if the transporter is also a TSD facility.

II. OTHER TYPES OF HAZARDOUS WASTE ACTIVITY

(A) _____ Treatment, Storage, and/or Disposal

(B) _____ Generator (Form B)

(If site is also a generator or TSD, attach this form to form "A" or "B" as appropriate.)

Briefly describe site activity: Will-Cook Waste is a transporter
of various wastes. They have not yet transported any
hazardous wastes.

III. MANIFEST SYSTEM AND RECORDKEEPING (Subpart B)

Yes	No	NI*	Remarks
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(A) Are copies of the completed manifests or shipping paper(s) available for review and retained for three years?

—	<input checked="" type="checkbox"/>	—	<u>none transported yet</u>
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IV. INTERNATIONAL SHIPMENTS

Yes	No	NI*	Remark Number
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A. Does the Transporter record on the manifest the date the waste left the U.S?

—	<input checked="" type="checkbox"/>	—	<u>none exported</u>
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B. Are signed completed manifest(s) on file?

—	<input checked="" type="checkbox"/>	—	<u>none transported yet</u>
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*Not Inspected

Rev. 1-26-81/J.B.

V. MISCELLANEOUS

A. Does transporter haul
Hazardous Waste into the
U.S. from Abroad?

— ☒ —

B. Does the transporter mix
Hazardous Waste of different
DOT shipping descriptions
by placing them into a single
container?

— ☒ —

NOTE: If (A) or (B) were answered "Yes" then the Transporter is also a Generator and must
comply with the Generator Regulations.

VI. REMARKS

Remarks: Will-Loop Waste is a transporter of various wastes.
They have not yet transported any hazardous wastes but
anticipate doing so in the future.

INSPECTION REVIEW FORM

719

NAME OF FACILITY: Will Cook Waste, Inc.ID NO. 1LD980613038LOCATION: (Address): 25 N. Ottawa St
Joliet IL 60431OPERATION: G T TSD
(Circle Appropriate)

INSPECTOR S F J

DATE OF INSPECTION: 1-19-82NAME OF REVIEWER & DATE: SKSwanson 5-27-82COMPLIANCE STATUS
(circle one) IN OUTVIOLATION CLASSIFICATION: None I II IIISTATE ACTION: Sent letter 4-16-82 - does not transport haz waste

RECOMMENDED ACTION:

NONE MONITOR STATE LETTER ADMINISTRATIVE COMPLAINT REFERRAL

ASSIGNEE: _____

DATE ASSIGNED: _____

cc: Unit Inspection Log



INSTRUCTIONS: If you received a preprinted label, affix it in the space at left. If any of the information on the label is incorrect, draw a line through it and supply the correct information in the appropriate section below. If the label is complete and correct, leave Items I, II, and III below blank. If you did not receive a preprinted label, complete all items. "Installation" means a single site where hazardous waste is generated, treated, stored and/or disposed of, or a transporter's principal place of business. Please refer to the INSTRUCTIONS FOR FILING NOTIFICATION before completing this form. The information requested herein is required by law (*Section 3010 of the Resource Conservation and Recovery Act*).

CONTINUE ON REVERSE

5	W	I	L	D	9	8	0	6	1	3	0	3	8	2	1
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16

IX. DESCRIPTION OF HAZARDOUS WASTES (continued from front)

A. HAZARDOUS WASTES FROM NON-SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from non-specific sources your installation handles. Use additional sheets if necessary.

1	2	3	4	5	6
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
7	8	9	10	11	12
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26

B. HAZARDOUS WASTES FROM SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific industrial sources your installation handles. Use additional sheets if necessary.

13	14	15	16	17	18
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
19	20	21	22	23	24
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
25	26	27	28	29	30
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26

C. COMMERCIAL CHEMICAL PRODUCT HAZARDOUS WASTES. Enter the four-digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.

31	32	33	34	35	36
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
37	38	39	40	41	42
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
43	44	45	46	47	48
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26

D. LISTED INFECTIOUS WASTES. Enter the four-digit number from 40 CFR Part 261.34 for each listed hazardous waste from hospitals, veterinary hospitals, medical and research laboratories your installation handles. Use additional sheets if necessary.

49	50	51	52	53	54
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26

E. CHARACTERISTICS OF NON-LISTED HAZARDOUS WASTES. Mark "X" in the boxes corresponding to the characteristics of non-listed hazardous wastes your installation handles. (See 40 CFR Parts 261.21 - 261.24.)

☐ 1. IGNITABLE
(D001)

☐ 2. CORROSIVE
(D002)

☐ 3. REACTIVE
(D003)

☐ 4. TOXIC
(D000)
X. CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

SIGNATURE



NAME & OFFICIAL TITLE (type or print)

Robert Pruim, Sec

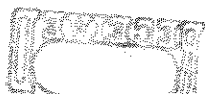
DATE SIGNED

8/28/81

EPA Form 6700-12 (6-80) REVERSE

V. OWNERSHIP

Henry Bechstein
Robert Pruim





ACKNOWLEDGEMENT OF NOTIFICATION
OF HAZARDOUS WASTE ACTIVITY
(VERIFICATION)

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER

• ILD980613038

INSTALLATION ADDRESS

WILL COOK WASTE INC
25 NO OTTAWA STREET
JOLIET

IL 60431

25 NO OTTAWA STREET
JOLIET

IL 60431

ILLINOIS WASTE, INC.
25 N. OTTAWA STREET
JOLIET, IL 60131

HAZARDOUS WASTE
PERMIT APPLICATION

E P A
R C R A ACTIVITIES
P.O. BOX A3587
CHICAGO, IL 60690-3587

DETACH ALONG THIS LINE

